



# State of New Hampshire 2011 ANNUAL REPORT

The following information shall be given as of January 1  
preceeding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2011

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE  
WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 01/12/2011

Business ID: 17996

William M. Gardner

Secretary of State

RICCI SUPPLY COMPANY, INC.

105 BARTLETT ST  
PORTSMOUTH, NH 03801

## ADDRESS OF PRINCIPAL OFFICE:

105 BARTLETT ST  
PORTSMOUTH, NH 03801

## REGISTERED AGENT AND OFFICE:

HAYES, ALICE E.  
105 BARTLETT ST  
PORTSMOUTH, NH 03801

ENTITY TYPE: CORPORATION

BUSINESS ID: 17996

STATE OF DOMICILE: NEW HAMPSHIRE

RETAILER OF BUILDING MATERIALS.

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☐

The new mailing address

☐

The new principal office address

PO Box is acceptable.

## OFFICERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE OFFICER BELOW)

PRES. Edward R. Hayes  
STREET 105 Bartlett Street  
CITY/STATE/ZIP Portsmouth Nh 03801

TREAS. Jeanne S. Hayes  
STREET 105 Bartlett Street  
CITY/STATE/ZIP Portsmouth Nh 03801

V-PRES. Carol J. Bryant  
STREET 105 Bartlett Street  
CITY/STATE/ZIP Portsmouth Nh 03801

NAME .....  
STREET .....  
CITY/STATE/ZIP .....

## BOARD OF DIRECTORS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE DIRECTOR BELOW)

DIR. Jeanne S. Hayes  
STREET 105 Bartlett Street  
CITY/STATE/ZIP Portsmouth Nh 03801

DIR. Edward R. Hayes  
STREET 105 Bartlett Street  
CITY/STATE/ZIP Portsmouth Nh 03801

NAME .....  
STREET .....  
CITY/STATE/ZIP .....  
NAME .....  
STREET .....  
CITY/STATE/ZIP .....

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

To be signed by an officer, director, or any other person authorized by the board of directors.

I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

Edward R. Hayes

Please print name and title of signer:

Edward R. Hayes

/

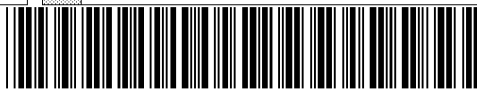
PRESIDENT

NAME

TITLE

FEE DUE: \$100.00

E-MAIL ADDRESS (OPTIONAL):



1799620111007

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A  
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE  
REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, P.O. Box 9529, Manchester, NH 03108-9529